

Positive Alternatives for Pregnancy and Parenting Grant Program

Solicitation Name Positive Alternatives for PregnancyDate 19-Sep-16Solicitation Number DPH0000106

Cost Proposal Worksheet

Section 5 - Cost Proposal

Unless otherwise specified in the eRFQ or contract agreement, all pricing should be inclusive of all costs associated with providing the services outlined in the eRFQ (i.e., shipping, postage, etc.). Supplemental Cost Data is neither required nor desired.

OFFEROR INFORMATION

Company Name	<u>Families First, Inc.</u>	Contact Name	<u>Bethaney Willis</u>
Address	<u>80 Joseph E. Lowery Blvd. NW</u>	Title	<u>Chief Financial Officer</u>
Address 2	<u></u>	Phone Number	<u>404-853-2813</u>
City, State, Zip	<u>Atlanta, GA 30314</u>	Email Address	<u>bethaney.willis@familiesfirst.org</u>

BUDGET DETAIL SUMMARY

DESCRIPTION OF SERVICES		Unit of Measure	Cost per Unit	Number of Units	Total Annual Amount
1	Administrative Fee (Please provide a separate line item cost to show how the fee is distributed)	Year	\$100,700.00	1	\$100,700.00
2	Salaries and Wages-1 FTE Program Coordinator and 1 PTE-Administrative Asst.-\$71,045				\$0.00
3	Office Supplies-\$1,000				\$0.00
4	Postage and Handling - \$1,000				\$0.00
5	Meeting Expenses-\$ 12,000				\$0.00
6	Travel-\$4,000				\$0.00
7	Advertising-\$2,500				\$0.00
8	Indirect Costs-10% for administrative operations for the agency-\$9,155				\$0.00
9					\$0.00
10					\$0.00
11					\$0.00
12					\$0.00
13					\$0.00
14					\$0.00
Total Projected Annual Costs					\$100,700.00
* This total cost is the amount that should be entered as the bid in Team Georgia Marketplace/Peoplesoft					\$100,700.00

I attest the information contained in this Cost Proposal Worksheet is an accurate estimate of our organization's financial proposal for this bid event.

Bethaney M. Willis
Authorized Signature

Bethaney Willis
Printed Name